	Combined Declaration For Lent Application and Power of Attorne						ATTORNEY DOCKET 82503F-P					
	As below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: METHOD AND SYSTEM FOR BUILDING A FAMILY TREE											
	he specification of which (check only one item below):											
ı	X is attached hereto.											
	was filed as United States Application Serial No. on and											
	was amended on (if applicable).											
	was filed as PCT international application Number on and was amended under PCT Article 19 on (if applicable).											
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.											
	acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 7, Code of Federal Regulations, §1.56.											
O	· · · · · · · · · · · · · · · · · · ·							patent or inventor's certificate or of any				
i D	Commence of the state of the st	application(s) designating at least one country other than the United States of America listed below and have also identified below any										
D)	preign applications(s) for patent or inventor's certificate or any PCT international application(s) designating a least one country other than the United states of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:											
ü	PRIOR FOREIGN/PCT APPLIC	CATION(S) AN	D ANY PRIORIT	Y CLA	IMS UNDER 35 U.S.C. 1	119:						
IJ	COUNTRY (II PCT, indicate PCT)	A	APPLICATION NUMBER		DATE OF FILING (day month year)			PRIORITY CLAIMED U	INDER 35 USC (
ijħ	····							YES		140		
ij.						10		YES		NO		
e Ph								YES		NO		
#4 <u>1</u>	I hereby claim the benefit under Title 35, United States Code, 119 §(e) of any United States provisional application(s) listed below:											
			D ANY PRIORIT	Y PRIORITY CLAIMS UNDER 35 U.S.C. §119 (e):								
C)	PROVISIONAL APP	PLICATION NUMBER	<u> </u>	-		FILING D	ATE					
g		,,										
	hereby claim the benefit under Title 35, United States Code, §120 of any prior United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those rior applications(s) in the manner provided by the first paragraph of Title 35, §112, I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56, which became available etween the filing date of the prior application(s) and the national or PCT international filing date of this application:											
	PRIOR US APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S FOR BENEFIT UNDER 35USC§120:											
ı	U.S. APPLICATIONS					STATUS (Check one)						
	U.S. APPLICATION NUMBER		U.S. FILING DATE		PATENTE	ĒD	PENDING	ABA	NDONED			
												
	PCT	PCT APPLICATIONS DESIGNATING THE U.S.										
ł	PCT APPLICATION NO. PCT FILIR				J.S. SERIAL NUMBERS ASSIGNED (if any)							
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POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with Eastman Kodak Company Customer No. 01333 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

end (Corresp	ondence to: Patent Legal	Direct Telephone Calls to: (name and telephone number)		
Eastman Kodak 343 State Street Rochester, NY 1			dak Company reet	Frank Pincelli (716) 588-2728 FAX: (716) 477-4646	
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9	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)	
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RE CI	ESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
Ę,	BUSINESS ADORESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)	
FUI	ILL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
RE	ESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
,	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
Licke (Pla)	Wave Wall	the Hund
DATE	DATE	DATE
6/29/01	6/28/0)	6/28/2001
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNĂTURE OF INVENTOR 206
DATE	DATE	DATE